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<p>Effective on 12/08/2004.  Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <p><b>FEE TRANSMITTAL</b></p> <p><b>For FY 2009</b></p>		<p><b>Complete if Known</b></p>	
		Application Number	10/528,951-Conf. #8756
		Filing Date	March 22, 2005
		First Named Inventor	Ian Flockhart et al.
		Examiner Name	S. P. Siefke
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	1797
TOTAL AMOUNT OF PAYMENT	(\$) 1,110.00	Attorney Docket No.	B0192.70057US00

**METHOD OF PAYMENT** (check all that apply)

☐ Check
 ☒ Credit Card
 ☐ Money Order
 ☐ None
 ☐ Other (please identify): \_\_\_\_\_

☐ Deposit Account
 Deposit Account Number: 23/2825
 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below
 ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17
 ☒ Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
<u>Fee Description</u>							<u>Small Entity Fee (\$)</u>
Each claim over 20 (including Reissues)							52
Each independent claim over 3 (including Reissues)							220
Multiple dependent claims							390
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			<u>Multiple Dependent Claims</u>	
						<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____ - or HP = _____ x _____ = _____							
HP = highest number of total claims paid for, if greater than 20.							
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
_____ - or HP = _____ x _____ = _____							
HP = highest number of independent claims paid for, if greater than 3.							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>			<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	
_____ - 100 = _____ /50 = _____ (round up to a whole number) x _____ = _____							
<b>4. OTHER FEE(S)</b>							
						<u>Fees Paid (\$)</u>	
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1253 Extension for response within third month						1,110.00	

SUBMITTED BY				
Signature	/John R. Van Amsterdam/	Registration No. (Attorney/Agent)	40,212	Telephone 617.646.8000
Name (Print/Type)	John R. Van Amsterdam			Date February 6, 2009

**Certificate of Electronic Filing Under 37 CFR 1.8**

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: February 6, 2009

Signature: /Sylvana Householder/